# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

## IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. Repair DATE 4/2/96 TAX MAP NO. 4669210726 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR ~~Jessie~~ Jewel M. Summers PHONE: Business _____ Home 663-4053

ADDRESS 121 Ginger Ln.

LOCATION Shinville Rd - TL Ginger Ln. 2nd House on left

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA — SITE CLASS RS DESIGN FLOW 360 L.T.A.R. .8 gpd/ft²

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☑ Repair System Type: I II III IV V VI

System Description: Gravity Conventional

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees _____

☐ Other _____

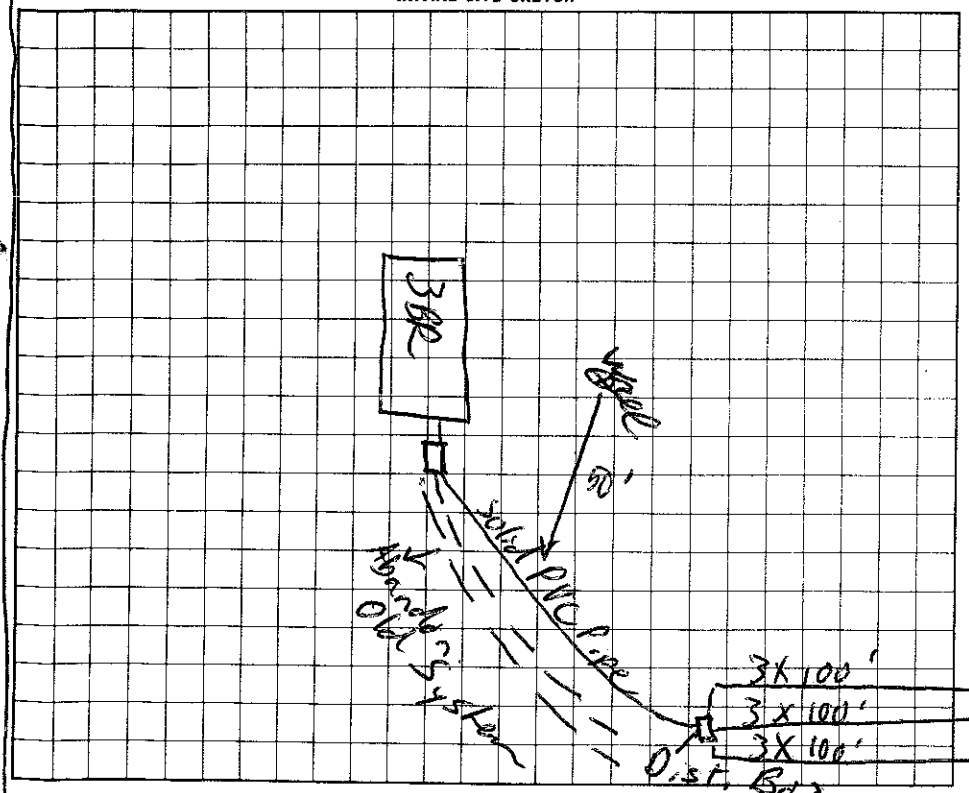
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: Keep 50' from well.

Comments:

**INITIAL SITE SKETCH**




**AS BUILT SKETCH**

Same as initial Site Sketch

I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.

Signed: Jewel M. Summers

Improvement Permit by: C. Brady Freeman EHSI date 4/3/96

Existing System Inspection by: C. Brady Freeman EHSI date 4/3/96

Installed by: J. Bowles

Certificate of Completion by: _____ date _____

Operation Permit by: C. Brady Freeman EHSI date 5/9/96

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD